

SET SAIL TRUST CORPORATE CHALLENGE APPLICATION FORM

NAME OF ORGANISATION:

TEAM NAME:

ADDRESS:

PREFERRED DATE: MON 13 JUNE
(PLEASE NUMBER 1-4 IN ORDER OR PREFERENCE)
ALL SAILINGS ARE AT 6PM

TUE 14 JUNE

WED 15 JUNE

THU 16 JUNE

LEAD CONTACT

NAME:

TELEPHONE:

EMAIL:

Please enclose a cheque in the sum of £1,000 made payable to the 'Set Sail Trust' and send with this completed form to
Suzy Hilton, Set Sail Trust, c/o P.O. Box 158, 1 Gategny Esplanade, St Peter Port, Guernsey, GY1 4EX
For further information please call 748204 or email sh@long-port.com

SIGNED

DATE

PRINT NAME

POSITION

Participants taking part in the corporate challenge will be required to sign a form undertaking their willingness to become a crew member whilst onboard Polly Agatha/Amelie Rose. In addition they will need to complete a Health Declaration. Applicants under 16 years must have written consent from their parents or legal guardian. This information will be treated with the strictest confidence.